



# Assurance

Pharmaceutical Care System™

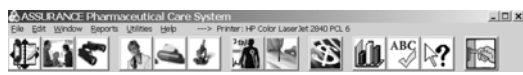
Setting the Standard for Medication Therapy Management

PATENT PENDING 60/685/600







Windows based program  
Easy to learn  
Easy to use




## Understanding the Functional Components of Assurance™







Patient Demographic



Care Plan & Therapy Goals




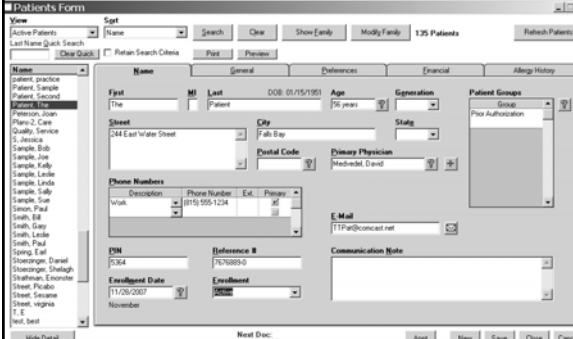
Condition & Medication Assessment




Reference and Resources

### Patient Demographic Information





## Care Plans connected with ICD-9 Codes



### Add Medical Conditions for Sample Caseone

Condition Groups	Description	ICD9	Chronic
ACNE	Acne	706.1	Yes
ACNE-ROSACEA	Rosacea	686.3	Yes
CANCER	Neoplastic disorders	140.0	Yes
CHEM-DEP	Chemical Dependency	292.4	Yes
CV	Cardiovascular Disorders	079.0	Yes
DERM	Dermatological problems	314.01	Yes
DIABETES	Diabetes and Complications	250.10	Yes


Condition Code Quick Search


Search

Default Scheduling Date: 05/21/2007

OK Cancel Help

## All Medical Conditions are Linked to a Care Plan Structure







**Medication Management**

Medications and SIG Codes can be added in a single click

Select SIG Codes for Condition HYPERTENSI (Sample Caseone)

### Lab Values to Evaluate Effectiveness and Safety



**Medication Management**

### Drug Therapy Problems categorized by a rationale thought process



**Medication Management**

## Drug Therapy Problems: Condition—Drug—Cause



**Medication  
Management**

Documenting the Economic Impact  
of the Member Intervention Medication Management2

## Evaluation—Status and note

**Medication Management**

The Patient - 56 years 01/15/1951 - Male - (815) 555-1234

Date: 12/05/2007 Pharmacist: Cipolle, Robert J.

Conditions: NEW Model!!

Condition	Previous Status	Date	Current Status	DTP	None	1	2	3	4	5
ACUTE T1S	Unchanged									
HYPERLIPID	Unchanged									
HYPERTENS	Partially Improved									

Referred By: [Name]

Physician Comment Text:

Dear Dr. MacDevitt:

Asked to discuss medication therapies with patient and to assess patient's drug-related needs. In order to more fully achieve the goals of therapy, I have the following recommendations for your consideration:

Blood pressure is not at goal after 2 months of therapy. Therefore, I recommend we increase the dose of hydrochlorothiazide to 25 mg daily. I will follow-up in 2 weeks to evaluate the effectiveness and safety of this new dosage. I have attached a Medication Therapy Management Summary for your records. This report includes all the medications your patient is currently taking.

We will continue to follow with you.

Robert J. Cipolle, Pharm.D.

Physician Test: [X] Patient Test: [X] In/Out Test: [X]

## Follow-up Evaluation--INTERVENTIONS

**Medication Management**

Creating new Evaluation...

The Patient - 56 years 01/15/1951 - Male - (815) 555-1234

Date: 12/05/2007 Pharmacist: Cipolle, Robert J.

Conditions: NEW Model!!

Condition	Intervention	Date	None	DC	Date
ACUTE T1S	ATC measurement	11/29/2007			
HYPERLIPID	Teach to take pulse	12/05/2007			
ADVERSE T1S	Advise food care products, show it	12/05/2007			
ADVERSE T1S	ATC measurement	12/05/2007			
ADVERSE T1S	Diabetic assessment	05/24/2008			
ADVERSE T1S	Glucose meter review	05/25/2008			
HYPERLIPID	Counsel on benefit of regular lipid work	05/27/2008			
HYPERLIPID	Check efficacy and safety	05/27/2008			
HYPERLIPID	ATC measurement	05/27/2008			
ADVERSE T1S	ATC measurement	05/27/2008			

Referred By: [Name]

Physician Comment Text:

Dear Dr. MacDevitt:

Asked to discuss medication therapies with patient and to assess patient's drug-related needs. In order to more fully achieve the goals of therapy, I have the following recommendations for your consideration:

Blood pressure is not at goal after 2 months of therapy. Therefore, I recommend we increase the dose of hydrochlorothiazide to 25 mg daily. I will follow-up in 2 weeks to evaluate the effectiveness and safety of this new dosage. I have attached a Medication Therapy Management Summary for your records. This report includes all the medications your patient is currently taking.

We will continue to follow with you.

Robert J. Cipolle, Pharm.D.

Physician Test: [X] Patient Test: [X] In/Out Test: [X]

## Follow-up Evaluation--OUTCOMES

**Medication Management**

Creating new Evaluation...

The Patient - 56 years 01/15/1951 - Male - (815) 555-1234

Date: 12/05/2007 Pharmacist: Cipolle, Robert J.

Conditions: NEW Model!!

Condition	Outcome	Met	Not Met	DC	Date
ADVERSE T1S	BP <130/80				01/27/2008
ADVERSE T1S	Glucose <130 mg/dl and <60 mg/dl				02/26/2008
ADVERSE T1S	ATC <75				02/26/2008
HYPERLIPID	Total cholesterol <200 mg/dl				02/27/2008
HYPERLIPID	Patient reports no ADR's or other safety				02/27/2008
HYPERLIPID	Pulse 50-100				02/27/2008
HYPERLIPID	Dyslipid 60-90				02/27/2008
HYPERLIPID	Systolic 30-140				02/27/2008
HYPERLIPID	Patient can take own BP correctly				02/27/2008
HYPERLIPID	Patient is compliant				02/27/2008
HYPERLIPID	Report home BP below 140/90				02/27/2008

Referred By: [Name]

Physician Comment Text:

Dear Dr. MacDevitt:

Asked to discuss medication therapies with patient and to assess patient's drug-related needs. In order to more fully achieve the goals of therapy, I have the following recommendations for your consideration:

Blood pressure is not at goal after 2 months of therapy. Therefore, I recommend we increase the dose of hydrochlorothiazide to 25 mg daily. I will follow-up in 2 weeks to evaluate the effectiveness and safety of this new dosage. I have attached a Medication Therapy Management Summary for your records. This report includes all the medications your patient is currently taking.

We will continue to follow with you.

Robert J. Cipolle, Pharm.D.

Physician Test: [X] Patient Test: [X] In/Out Test: [X]

## Medication Management Systems, Inc.

1000 Sheild Parkway, Suite 250  
Minneapolis MN 55426  
(952) 746-8185

**Personal Medication Summary**

The Patient: Personal Medication Summary 12/05/2007

Next Appointment: 12/11/2007

Conditions	Directions for Medications Used
Diabetes Protocol	GLUCOPHAGE TAB 500MG (Glucoside HCT & 500 MG) Take one tablet by mouth with supper to control blood sugar.
Elevated Blood Cholesterol	ZOCOR TAB 20MG (Simvastatin Tab 20 MG) Take one tablet by mouth at bedtime for cholesterol.
High Blood Pressure	Hydrochlorothiazide Cap 12.5 MG Take one tablet by mouth every morning to control blood pressure. Prescribed by: Ken Paulsen, MD (612) 335-4343

## MTM Report for Physicians

**Medication Management**

Medication Management Systems, Inc.  
6400 Wingate Blvd  
Park Place West, Suite 250  
St. Louis Park MN 55426  
(952) 746-8185

Patient Name: [Name]  
Date of Birth: [Date]  
Age: [Age]  
Gender: [Gender]  
Referral # [Referral #]

History of Drug Allergies:

Medication	Allergic Reactions	Date Verified
Penicillin	Rash	11/03/2007

Adverse Drug Reactions:

Medication	Adverse Reactions	Date Verified
ACE Inhibitor	Cough	11/03/2007

Conditions Managed with Drug Therapy:

Condition	Drug Therapy Evaluation Status (DC)	Medication and Use
Diabetes Protocol	Stable	GLUCOPHAGE TAB 500MG (Glucoside HCT & 500 MG) Take one tablet by mouth with supper to control blood sugar. Ken Paulsen, MD (612) 335-4343
Hypertension	Stable	ZOCOR TAB 20MG (Simvastatin Tab 20 MG) Take one tablet by mouth at bedtime for cholesterol. Ken Paulsen, MD (612) 335-4343

Physician Evaluations:

Dear Dr. MacDevitt:

As requested, I have reviewed the medication therapy with patient and to assess patient's drug-related needs. I have the following recommendations for your consideration:

Blood pressure is not at goal after 2 months of therapy. Therefore, I recommend we increase the dose of hydrochlorothiazide to 25 mg daily. I will follow-up in 2 weeks to evaluate the effectiveness and safety of this new dosage. I have attached a Medication Therapy Management Summary for your records. This report includes all the medications your patient is currently taking.

We will continue to follow with you.

Robert J. Cipolle, Pharm.D.

Next appointment with the Pharmacist: 12/11/2007 01:15 PM

Physician: [Name]  
Date: [Date]

## Service Billing by Payer Guidelines

**Medication Management**

Creating new Evaluation...

The Patient - 56 years 01/15/1951 - Male - (815) 555-1234

Additional Procedures:

Evaluation and Management

Claim Date: 12/05/2007 Responsible Pharmacist: Cipolle, Robert J.

Base: 0.00 Weight: 1.00 Amount: 0.00

Carrier/Plan: [Name]

Modifiers: [Name]

CPT Code: [Code]

Consult Time: [Time]

Choose the Evaluations for this Claim:

Code	Pharmacist	Type	Comment
93.02	Cipolle, Robert J.	1.00	Expanded problem focused

Billing Physician: [Name]

Prior Authorization Number: [Number]

Conditions: 2-DTPub: 1-Med: 2-Services: 0 Total: \$75.00



**Medication Management**  
SYSTEMS, INC.

Reference Document Viewer

Expand All Collapse All

Sort By  
☒ Intended For  
☐ ICD9 / GPI  
☐ ICD9 / GPI

View Current Reference

☒ Display Reference Documents for Status 1 (checked)

References

- Reference Document
  - ICD9 / GPI (undefined)
- ATP III Quia Reference
  - Type 2 Diabetes Mellitus (HMS)
- Depression management
  - ICD9 / GPI (undefined)
  - Depression (HMS)
- Diabetes management
  - ICD9 / GPI (undefined)
  - Diabetes Type 1 (HMS)
  - Diabetes Type 2 (HMS)
  - One Touch Diabetes Management v3.0 (HMS)
- Government web sites
  - ICD9 / GPI (undefined)
  - Natural Gasoline Clearinghouse
- Government Web Sites
  - ICD9 / GPI (undefined)
  - Natural Gasoline Clearinghouse



**Medication Management**  
SYSTEMS, INC.

**Appointment Scheduling Form**

The Patient - 56 years 01/15/1951 - Male - (815) 505-1234

Scheduled	Day	Progress	Scheduled Date	Scheduled Time	Minutes Needed
12/01/2007	Mon		12/17/2007	03:15 PM	

**Monday**

Appointment Type:  Progress:

Assigned to User:  [View User Schedule to Select Later/Time](#)

☒ Appointment is Active

Appointment Synopsis:

Appointment Note:

Buttons: [Edit Detail] [Search] [Clear] [Delete] [Undo] [New] [Save] [Close] [Cancel]



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## Printed On 12/07/2007

Count only the most recent document for each patient within the date range

Cannot Determine: 2 (20.0%)

Out of Range Patients with known reasons: 0 of 0 Patients

Out of Range Patients with known reasons: 0 of 0 Patients



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Printed On 12/05/2007

*Earliest Recorded Value / Most Recent Recorded Value*

Diabetes, Robert  
Example, Bob

Sample, Sally	120.62	110 (+)	03/13.07	130 (+)	+20
Patient Count	10	10			
In Range	1	5			
% In Range	10.0 %	50.0 %			
Out of Range	9	5			
% Out of Range	90.0 %	50.0 %			
Mean Value	101.10	90.20			
Standard Deviation	29.21	34.47			



**Medication Management**



Printed On 12/05/2007

## Evolutions Between 01/01/2006 - 12/31/2006 (Last Year)

Evolutions Between 01/01/2006 - 12/31/2006 (Last Year)

### Patients

## Patient

		ACTHAW	04/17/06	Partially Improved	06/05/06	Improved	0
		PTWPT	04/04/06	Partially Improved	06/04/06	Improved	1
		VFABW	04/04/06	Stable	06/04/06	Stable	0
Bedtime, Mary		SLCAGD	10/05/06	Unimproved	12/11/06	Unimproved	0
		VFPTENR	10/05/06	Unimproved	12/11/06	Unimproved	0
		BAWJESZ FLUJOT	10/05/06	Unimproved	12/11/06	Respect	3
		VFABW	10/05/06	Unimproved	12/11/06	Respect	3
AUL, NORMAN	(04011570)	EACHAN	04/04/06	Partially Improved	06/04/06	Stable	2
		CPIS	04/04/06	Stable	06/04/06	Stable	1
		BM1PTE	04/04/06	Improved	11/05/06	Partially Improved	1
		SEWZ	04/04/06	Stable	06/04/06	Stable	0
		VFPTPLD	04/04/06	Partially Improved	06/04/06	Stable	1
		VFPTENR	04/16/06	Improved	11/05/06	Partially Improved	4
		SE17EWS	04/17/06	Stable	10/11/06	Improved	-2
		ST19P0R	04/04/06	Partially Improved	06/04/06	Stable	2
Carpenter, Bob		STW43EN	04/04/06	Stable	06/04/06	Partially Improved	1
		NO14JEN	05/17/06	Initial	10/11/06	Stable	0
		PRE18ENTH4ROSE	04/04/06	Stable	07/11/06	Stable	0
		SEPT14EN	04/04/06	Unimproved	06/04/06	Unimproved	0
		VFPTENR	02/04/06	Stable	10/11/06	Partially Improved	-1
		ST19P0R	02/04/06	Stable	10/11/06	Partially Improved	0
Copley, Sue		VFPTWTE	03/06/06	Stable	10/11/06	Stable	0
		ACTHAW	03/06/06	Partially Improved	10/11/06	Partially Improved	0
		AN-DRIS	03/06/06	Stable	10/11/06	Stable	0



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Printed On 12/05/2007

*Evaluations Between 03/03/2006 - 12/31/2006 (Last Year)*

*Evaluations Between 03/03/2006 - 12/31/2006 (Last Year)*

Outcome 5

	Gender	Latin_amer	Eastern_eur	Latin_amer	Eastern_eur
Partially improved	Stable	2	4	5	6
Partially improved	Improved	1	3	3	5
Partially improved	Partially improved	0	4	0	6
Unimproved	Unimproved	3	1	3	2
Unimproved	Improved	0	1	0	2
Unimproved	Partially improved	-1	1	-1	2
Unimproved	Stable	4	1	4	2
Unimproved	Unimproved	3	2	6	3
Unimproved	Partially improved	2	1	2	2
Unimproved	Stable	0	1	0	2

Likert Status Values

Received = 7  
 Steps = 7

Improved 4.5

503

Graph A10.1

Standard

\_\_\_\_\_